

EXAMINER

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Substitute	for form 14	149A/PTO		Complete if Known				
INFORMA	NOITA	DISCI	OSURE	Application Number	To be assigned 10/0/05, 117 Herewith 9-18-02			
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				Applicants	Mayer			
(use as many s	sheets as	necessary	<i>)</i>	Group Art Unit				
				Examiner Name				
Sheet	1	of	1	Attorney Docket Number	201-0463			

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EXAMINER INITIAL*	Cite No. 1	Office ⁵	gn Patent Document Kind Code ⁵ Number ⁴ (if known)			NAME	DATE MM-DD-YY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	Te
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EXAMINER THE CONSIDERED 2/4/09
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